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## BIB DATA SHEET

CONFIRMATION NO. 3808

<b>SERIAL NUMBER</b> 09/454,492	<b>FILING or 371(c) DATE</b> 12/06/1999 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3693	<b>ATTORNEY DOCKET NO.</b> P43312	
<b>APPLICANTS</b> CLAUDIO R. BALLARD, LLOYD HARBOR, NY; <b>** CONTINUING DATA *****</b> This application is a DIV of 09/081,012 05/19/1998 PAT 6,032,137 which is a CIP of 08/917,761 08/27/1997 PAT 5,910,988 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 01/07/2000					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /RICHARD C WEISBERGER/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance rcw Initials	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWINGS</b> 11	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> Hershkovitz & Associates, LLC 2845 Duke Street Alexandria, VA 22314 UNITED STATES					
<b>TITLE</b> REMOTE IMAGE CAPTURE WITH CENTRALIZED PROCESSING AND STORAGE					
<b>FILING FEE RECEIVED</b> 921	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		